



ALABAMA DEFENSE LAWYERS ASSOCIATION

4001 Carmichael Road, Suite 320 | Montgomery | AL | 36106
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MEMBERSHIP RENEWAL REQUEST

Name: _____ Alabama Bar #: ASB- _____
(Please Print) (i.e. 1234-X56X)

Firm/Employer: _____ Phone: _____

Mailing Address: _____ County: _____

E-mail: _____ Date Admitted to Alabama Bar: _____
(By providing the above, you are granting express consent to receive e-mails from ADLA.)

Percentage of your civil litigation time currently devoted to defense representation – _____ (Must be greater than 51%)

Annual Membership Dues:

\$150.00 - admitted to practice less than 5 years \$200.00 - admitted to practice 5 years or more

If membership is renewed, I agree to abide by the bylaws of the Alabama Defense Lawyers Association.

Applicant Signature (Required)

Date

Please send check payable to:
ADLA
4001 Carmichael Road, Suite 320
Montgomery, AL 36106

(For office use only)

Check #: _____ (F P) Amount: _____ Rcvd: _____
Admitted: _____ CC _____ DB _____ EX _____

ADLA is exempt from Federal taxation under IRC 501(c)(6). Membership dues are not tax deductible as a charitable contribution; they may be deductible as a business expense. Federal ID #63-0779651